

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number: 09/335,742	Confirmation Number: 6824
	Filing Date: June 18, 1999	
	First Named Inventor: Marie-Pascale AUDOUSSET	
	Group Art Unit: 1751	
	Examiner: Margaret V. Einsmann	
	Attorney Docket Number: 05725.0429-00000	
Attorney Customer Number: 22,852		
This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.		
1. Submission required under 37 C.F.R. § 1.114: Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, application must request non-entry of such amendment.		
a. <input type="checkbox"/> Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. <ul style="list-style-type: none"> i. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on [Date] _____. ii. <input type="checkbox"/> Other _____ 		
b. <input checked="" type="checkbox"/> Enclosed: <ul style="list-style-type: none"> i. <input checked="" type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement iv. <input type="checkbox"/> Other _____ 		
2. Miscellaneous <ul style="list-style-type: none"> a. <input type="checkbox"/> Suspension of action on the above-mentioned application is requested under 37 C.F.R. § 1.103(c) for a period of [number] months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required.) b. <input type="checkbox"/> Other _____ 		
3. Fees <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> The filing fee is calculated as follows: <ul style="list-style-type: none"> i. <input checked="" type="checkbox"/> \$770.00 RCE fee required under 37 C.F.R. § 1.17(e) ii. <input checked="" type="checkbox"/> Petition for extension of time for (1 Months) \$110.00 iii. <input type="checkbox"/> Other _____ b. <input type="checkbox"/> Check in the amount of \$[Text] enclosed. c. <input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiencies in the filing fees, or credit any overpayments to Deposit Account No. 06-0916. 		
Signature of Applicant, Attorney, or Agent Required		
Name: Maria T. Bautista	Reg. No.: 62,516	
Signature: <i>Maria Bautista</i>	Date: August 6, 2004	
Certificate of Mailing or Transmission		
I hereby certify that this correspondence is being deposited with the United States Postal Service via facsimile transmitted to the U.S. Patent and Trademark Office on: August 6, 2004		
Name: Jennifer Leveille		
Signature: <i>Jennifer Leveille</i>	Date: August 6, 2004	

PATENT APPLICATION FEE DETERMINATION RECORD
Effective November 10, 1998

Application or Docket Number

09/335742

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	54 minus 20 = * 34	34
INDEPENDENT CLAIMS	7 minus 3 = * 4	4
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY
RATE	380.00
OR	760.00
X\$ 9=	
OR	X\$18= 648
X39=	
OR	X78= 312
+130=	
OR	+260=
TOTAL	1720

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2)	(Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 54 Minus	** 36	= 6
	Independent	* 7 Minus	*** 7	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY	OTHER THAN OR SMALL ENTITY
RATE	ADDI- TIONAL FEE
OR	X\$18=
X\$ 9=	
OR	X78=
X39=	
OR	+260=
+130=	
TOTAL	ADDITIONAL FEE
OR	TOTAL ADDITIONAL FEE

AMENDMENT B	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2)	(Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus	**	=
	Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

ADDITIONAL FEE	ADDITIONAL FEE
X\$ 9=	
OR	X\$18=
X39=	
OR	X78=
+130=	
TOTAL	ADDITIONAL FEE
OR	TOTAL ADDITIONAL FEE

AMENDMENT C	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2)	(Column 3) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus	**	=
	Independent	* Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

ADDITIONAL FEE	ADDITIONAL FEE
X\$ 9=	
OR	X\$18=
X39=	
OR	X78=
+130=	
TOTAL	ADDITIONAL FEE
OR	TOTAL ADDITIONAL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.